



National Museum of the United States Air Force

YOUTH GROUP REGISTRATION FORM

INSTRUCTIONS

Written requests are required for all groups planning to visit the National Museum of the United States Air Force. Your request will be processed in the order it was received, and you will then receive written confirmation and additional information within two weeks of request. Confirmations will be sent by e-mail whenever possible. Please see the Education web site for a description of our programs (<http://www.wpafb.af.mil/museum/edu>) before completing this form.

All groups must contact the Education Division prior to visits. Three weeks advance notice is required for all programs (including scavenger hunts).

Forms must be clearly written and all appropriate areas completed.

Illegible and incomplete forms will not be processed. Youth group leader's signature is required.

Fax this form (937-656-6360) or mail to:

NMUSAF/MUT
1100 Spaatz Street
Wright-Patterson AFB OH 45433-7102

Dates to submit forms:

For visits between September 30 – January 31: submit form no earlier than the day after Labor Day.

For visits between February 1 – June 15: submit form no earlier than the day after New Years Day.

For visits between June 15 – September 30: submit form no earlier than the third Monday of April.

SECTION I: GROUP INFORMATION

Group name:

Leader's name: Ms. ☐ Mr. ☐

Other leaders:

Street address:

City:

State:

Zip:

Phone:

Fax:

Cell phone:

E-mail address (for confirmation):

Number of youth participants:

Number of adults:

Grade level(s):

Additional information about the group:

Do any of the youngsters have special needs requiring any accommodations? No ☐ Yes ☐

If yes, explain:

SECTION II: PROGRAM CHOICE

Check one:

☐ We would like to request a self-directed scavenger hunt (Complete Section II - then skip to Section IV).

☐ We would like to request a Storytime program (Complete Section II – then skip to Section IV).

☐ We will be doing an "on your own" Museum visit without an educational component (Skip to Section III).

If you requested a scavenger hunt, choose a level (be sure to indicate how many of each level you require):

☐ Primary _____ ☐ Intermediate _____ ☐ Secondary _____ ☐ JROTC/CAP _____ ☐ Fighter Pilot _____

Requested date for Museum visit:

First choice:

Second choice:

Third choice:

Time for program to begin:

First choice:

Second choice:

Third choice:

SECTION III: ON OWN VISITS TO THE MUSEUM

Date of Museum visit:

Arrival time:

Departure time:

SECTION IV: LUNCH PLANSThe group will be eating lunch at the Museum: No ☐ Yes ☐ If yes, please choose one:

- ☐ The group will be bringing their own lunches and eating in the outside picnic area (no indoor picnic facilities).
☐ The group will be eating in the café and will call to order box lunches (call 937-255-2735, ext. 451 to order).
☐ The group will be eating in the café and will purchase food a la carte.

SECTION V: RULES AND REGULATIONS

IN ALL CASES, LEADERS AND CHAPERONES ARE HELD RESPONSIBLE FOR THE CONDUCT OF THEIR GROUPS. THE GROUP LEADER MUST READ THE FOLLOWING AND INITIAL EACH GUIDELINE. GROUPS NOT FOLLOWING THESE GUIDELINES MAY BE ASKED TO LEAVE THE MUSEUM. UNSIGNED DOCUMENTS WILL NOT BE PROCESSED.

_____ Youngsters under age 18 must be accompanied and supervised by an adult at all times.

_____ One adult for every ten school-aged visitors is required. Please have young people divided into these groups prior to your arrival.

_____ No touching, climbing on, or entering aircraft or other exhibits is permitted, unless otherwise stated.

_____ For safety reasons, no running is permitted.

_____ No loud, abusive or disruptive behavior is permitted.

_____ Do not go beyond roped-off areas. This applies to both inside and outside the Museum, in the Presidential Hangar, the 8th Air Force Control Tower and the Nissen Hut.

_____ Food and drink purchased in the café must be consumed in the café. No other food is permitted inside the Museum.

_____ Picnic shelters are available outside on a first come, first served basis.

_____ Purchases made in the gift shop should remain in the gift shop bag. Please keep receipts with these items.

_____ Smoking is not permitted in the Museum. Young people caught smoking will be reported to their leader/chaperone.

I have read, agree to distribute and will abide by all group instructions as listed above:

Signature of group leader:

Date:

SECTION VII: COMMENTS or QUESTIONS